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Rehabilitation of the Blind in Sokoto and Montana States,  
with Recommendations for the Improvement of Rehabilitation  
in Sokoto State of Nigeria

by

Atiku Abubakar Kigo

B.A. (Hons) History, University of Ibadan, 1978

Presented in Partial Fulfillment of the Requirements

of the Degree of

Master of Public Administration

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1985

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## INTRODUCTION

The administration of programs and policies in Nigeria has often been difficult and sometimes nearly impossible. This is attributable to several reasons. One of the most important is that goals and objectives are laid down without the creation of a viable framework for the implementation of the stated objectives. The goals are sometimes vague and their purposes dubious. One of the root causes of this problem is that Nigeria is yet to learn how to deal with its colonial experience. The question as to whether Nigeria is going to continue blindly copying things western or try to make its objectives relevant to traditional norms and values is yet to be answered fully. For the moment, it seems Nigeria is content with copying things in the western manner regardless of whether they are applicable in the Nigerian context or not.

Another reason hindering the proper management of programs and policies in Nigeria is that Nigeria has not been able to acquire the managerial competence necessary to run its programs. For it is one thing to copy another structural model of development and it is quite another to be able to acquire the necessary skills to operate the model. Nigeria has tried to overcome this by sending its workers overseas on training programs. This approach has failed because, among other reasons, the western countries have been reluctant to impart the full-knowledge required to these workers. The result is that although huge sums of

money are spent on the training programs little is achieved.

Funding has also been a problem in the management of programs and policies. As a third world nation, Nigeria shares with its counterparts the arduous task of distributing meager resources to diverse and competing programs. These funds are often not enough and sometimes even the little that is available is late in coming. The funding situation is worsened by corruption which is prevalent among civil servants.

This paper is about the rehabilitation of the blind in Sokoto State and the ways in which it can be improved. The analysis of the topic and the proposed recommendations presented in this paper deal with the problems discussed above. The objectives of this paper are two-fold.

The first aim is to come up with viable means of rehabilitating the blind in Sokoto State. This is considered important by this writer because the participation of everyone in the development of a nation, especially a poor one, is crucial. It is also important to establish an instrument for the rehabilitation of the blind and other handicapped people so that a mechanism for handling emergency situations is made available. Catastrophic situations like the recent one in Bophal, India where literally thousands of people suddenly went blind or suffered other injuries can be more adequately handled if the proper structures for rehabilitation already exist. With due modesty, it is also hoped that recommendations made for the rehabilitation of the blind will be found useful in rehabilitating other



handicapped people in Sokoto.

This paper also intends to demonstrate that Sokoto State and indeed Nigeria in general need not discard its values in the implementation of programs. The aim here is to show that it is possible to marry traditional values and other systems in order to come up with something workable.

In trying to achieve these stated objectives, an examination of the rehabilitation of the blind in Montana will be made. Emphasis will be placed on the questions of eligibility for rehabilitation, training programs, and promotion of employment opportunities. However, the examination of the rehabilitation process in Montana is only intended to be a base for the recommendations to be made and will not be regarded as the whole solution to the problems of rehabilitation in Sokoto State. As Daniel Thurstz and Joseph L. Vigilante have pointed out, we should be "aware of the relationships between culture and service delivery systems. Approaches that seem self-evident in one setting can be catastrophic in another. Social administrators, planners and researchers who have worked on the international scene should have learned that programs are not easily transferable from one country to another."<sup>1</sup>

The paper examines documents published by the Sokoto State government which are pertinent to the problems under discussion. Through this method, the author looked into the prevailing approach to service delivery, training programs and employment opportunities for the blind. I

also traveled to Helena to examine similar documents relating to the Department of Social and Rehabilitation Services. In addition, I held discussions with some of the officials of the department so as to get first hand information on relevant matters. Questions investigated included the following:

1. How are the institutions for the blind organized?
2. What is the approach to training?
3. What are the eligibility requirements for entry into the training programs?
4. Which new employment opportunities have been created?
5. What is the general data on employment opportunities?
6. Is there any need for changes now? If so, why?

The following chapter provides an overview of vocational rehabilitation, including how it is defined and how it is pursued both in Sokoto State, Nigeria and the United States. The purpose of chapter one is to provide background information as well as a basic framework for analysis of vocational rehabilitation. Chapter two examines vocational rehabilitation of the blind in Montana. The chapter is particularly concerned with eligibility requirements and vocational training of the blind. The third chapter narrows the focus to the promotion of employment opportunities for the blind. In the fourth and last chapter the paper makes recommendations for the improvement of vocational rehabilitation of the blind in Sokoto State, Nigeria.

## INTRODUCTION - ENDNOTES

<sup>1</sup>Daniel Thursz and Joseph Vigilante, eds., Meeting Human Needs: A Nation's Responsibility to the Human Needs of Its Citizens, Vol. 1, Social Service Delivery Systems (London: Sage Publications, 1975), p. 10.

## CHAPTER ONE

### AN OVERVIEW OF VOCATIONAL REHABILITATION

Since the rehabilitation of the blind is a subset of social welfare services, it is appropriate first to define social welfare. The definition is necessary in order to understand the scope of responsibilities involved in rehabilitating the handicapped.

There is no precise statement of the definition of social welfare institutions. However, there is agreement on the fact that social welfare reflects the dominant and enduring values of a society. The NASW Encyclopedia of Social Work says that "social welfare generally denotes the full range of organized activities of voluntary and governmental agencies that seek to prevent, alleviate, or contribute to the solution of recognized social problems, or to improve the well-being of individuals, groups or communities. Such activities use a wide variety of professional personnel such as physicians, nurses, lawyers, educators, engineers, ministers, social workers and paraprofessional counterparts of each."<sup>1</sup> Walter Friedlander defines social welfare as the "organized system of services and institutions designed to aid individuals and groups to attain satisfying standards of life and health, and personal and social relationships which permit them to develop their full capacities and promote their well-being in harmony with the needs of their families and community."<sup>2</sup> The U.S. committee<sup>3</sup> at the 1974 International Conference on Social

Welfare, considers the term social welfare to include:

1. The wide range of services designed to attain ways of life acceptable to individuals and community sometimes thought of collectively as the "social aspects of development," and including services designed to strengthen the individual confronted with the economic, physical, mental, or social disabilities, together with
2. Those aimed at influencing the remedy of conditions leading to dependency.

Other writers have contented themselves with defining social welfare in terms of its observable legislative features. Joseph Hefferman<sup>4</sup> has defined social welfare programs as those that (1) establish some minimal standard of social functioning; (2) identify a benefit schedule; and (3) identify a population group that is to be privileged with a public guarantee to the benefits. Hefferman's definition focuses attention more on the product of social welfare programs than the process of social welfare efforts. Although there are differing definitions of social welfare, it seems to be the consensus that the programs established to accomplish social welfare objectives are the product of a country's political and economic system. The structure of a country's social welfare system and the structure of its basic political and economic institutions co-exist in a tension relationship. The social inequality to which social welfare institutions attempt to respond is the consequence of dysfunctions within an economic system which grants economic well-being and security to some but not to all. In response to these dysfunctions, social welfare programs are created and their operation changes the

environment that generated them.

It is easy to see from the foregoing that rehabilitation falls within the sphere of social welfare programs. It especially falls within the definition by the U.S. committee at the 1974 Conference on Social Welfare, because it is "designed to strengthen the individual confronted with economic, physical, mental, or social disability." This paper is especially concerned with vocational rehabilitation. Vocational rehabilitation is defined as the organized effort to help physically and mentally handicapped people attain and maintain the ability to work. Vocational rehabilitation services are justified on the grounds that work is profoundly important to all adults, and disability may prevent meaningful participation in the world of work. Moreover, society needs the productive efforts of every person, and it is good business to help handicapped people to become as productive as possible.

Although vocational rehabilitation is work-oriented, it includes almost every service (medical, psychosocial, and vocational) that will help make the handicapped person employable. Vocational rehabilitation services are provided by members of many professions. At various stages of the vocational rehabilitation process, the psychologist, the social worker, the physician, the nurse, the speech and hearing pathologist, the occupational therapist, the vocational evaluators, and others may participate.

## Vocational Rehabilitation in the United States

Vocational rehabilitation in the United States started with the disabled veterans of World War I and disabled veterans of later wars. Since the 1920's, the state-federal vocational rehabilitation program, which operates in every state and is operated in rehabilitation facilities operated by voluntary organizations, has also benefited disabled civilians.

The vocational rehabilitation program in the United States is operated under a state-federal partnership. From the beginning, states have been required to develop and submit plans in which they describe the methods to be used and the standards to be applied to administration and services. No effort has been made to require uniformity in state programs. States have been encouraged to provide services in addition to those for which federal reimbursement is available. Although, federal regulations pursuant to the federal legislation have been issued from the beginning, these regulations are more often in the form of guidelines than mandates. When the Secretary of Health, and Human Services approves the state plan, it becomes a contract between the state and federal government. Fiscal and administrative audits are made to determine whether the contract is being carried out.

The requirements for administration of vocational rehabilitation at the state level have varied from time to time, gradually becoming more liberal. Vocational rehabilitation could be administered by an independent

agency or by an umbrella agency which includes at least two other major organizational units.<sup>6</sup>

The process of providing vocational rehabilitation in the United States is paraphrased from the work of Robert E. Thomas<sup>7</sup> as follows:

1. Services should be rendered on a one-to-one case-by-case basis. From the beginning counselors evaluated and served their clients individually. The agencies did not seriously consider establishing schools or special classes for handicapped people. Only in recent years have the vocational rehabilitation providers begun to develop facilities for the use of their clients. As might be expected from this one-to-one approach vocational guidance became a core service.
2. From the beginning, vocational rehabilitation has been job oriented. The agency and its personnel think in terms of job handicaps, training to enable one to hold a job, physical restoration to do a better job or to broaden opportunities, job placement, and job adjustment. Regardless of other factors in a case, this concentration on jobs and job readiness has resulted in a goal oriented program with goal oriented services. Since employment at some level is the objective in every case, success or failure can be measured with comparative ease.
3. Vocational rehabilitation agencies attempt to provide all the services required to make the individual employable. This does not necessarily mean that the



agency pays for all the services. It does mean that the agency is responsible for the individual getting all the services he/she needs. The agency can purchase a service not available under other conditions.

4. In vocational rehabilitation, the counselor has funds at his/her disposal. The ordinary practice is to have a budget that can be spent on case services for his/her clients. This means that the counselor is in a position to buy services that he/she cannot provide by himself/herself. Hence, he/she is involved in the community. He/she develops effective working relationships with hospitals, physicians, vocational schools, rehabilitation facilities, and other professionals or programs that have services needed by his/her clients. The fact that he/she is in a position to purchase such services facilitates his/her involvement. The rehabilitation counselor, then is almost always deeply involved in the totality of services for handicapped individuals in the community.
5. Rehabilitation agency personnel are urged to train around a disability. If the client's condition can be improved, the counselor may help him/her achieve this improvement. The fact that the counselor has financial assistance available makes him/her effective in working with his/her clients who may need physical restoration services.

One of the distinct features of vocational rehabilitation in the United States is the facility. The

rehabilitation facility is the place where handicapped individuals may go to profit from the services of a number of professionals and from association with other handicapped people. The professionals or the staff of the rehabilitation facilities do not practice their skills individually but as a team. Under the direction of a designated leader, the services are coordinated to serve the best interests of the handicapped people. A rehabilitation facility may be comprehensive in that it attempts to provide a wide variety of services, or it may be specialized and limit its services to specific areas of concern. Services in comprehensive facilities range from physical and vocational diagnosis to vocational training and placement. They include medical, physiological, and social services as well as vocational services. Specialized facilities include a large number of vocational rehabilitation workshops that concentrate on vocational evaluation, vocational adjustment, vocational training and placement services. Such facilities depend on others to provide other specialized services such as medical rehabilitation.

The state vocational rehabilitation agencies are large users of rehabilitation facilities, especially those that provide comprehensive or work oriented services. Generally, a rehabilitation counselor retains responsibility for his/her client from the beginning to the end of services, but he/she may send the client to a rehabilitation facility for specialized services and may reimburse the facility on a fee basis for services. Several state vocational rehabilitation

agencies now operate comprehensive vocational rehabilitation centres to serve their own clients and others. Such states include Arkansas, Iowa, Georgia, Pennsylvania, Virginia, and West Virginia. Comprehensive rehabilitation centres for the blind are illustrated by centres in Arkansas, Kansas, and North Carolina.<sup>8</sup>

Another interesting and observable feature of the rehabilitation model in the United States is the research and demonstration part of the model. The 1954 amendments authorized the Secretary of Health and Human Services to make "grants to public and other agencies for projects for the establishment of special facilities and services which hold promise of making substantial contribution to the solution of vocational rehabilitation problems common to all or several of the states."<sup>9</sup> This program operates through a series of rehabilitation research and training centres and a program of grants to nonprofit agencies made on the basis of individual project applications. The latest development in the research aspect of this model is the initiation of research utilization programs in which the states and the Rehabilitation Services Administration (RSA) are attempting to identify and put into practice research findings relevant to the provision of vocational rehabilitation services.

The 1954 amendments also authorized a training program for vocational rehabilitation personnel. Vocational rehabilitation has been infused into colleges, universities, and other training institutions. Funds are also earmarked

for training personnel in new training programs. These funds are especially used for training personnel in facility administration, vocational rehabilitation of the blind, rehabilitation of the deaf, rehabilitation of the mentally retarded, nursing, dentistry, occupational therapy, recreation, social work, speech pathology, and audiology, sociology, and psychology.

#### Observations on Vocational Rehabilitation in the United States

The foregoing is an attempt to provide a brief description of some of the distinguishable features of the rehabilitation in the United States. However, as is the case with most man-made programs, the services in the United States are not without some observable weaknesses. Based on discussions with some officials of the Department of Social and Rehabilitation Services in Montana<sup>10</sup> and literature provided by some states' rehabilitation service departments,<sup>11</sup> the following weaknesses are identifiable:

1. A common complaint is that funds are not adequate to provide the services needed. The number of persons referred or applying for services continues to grow as vocational rehabilitation services become better known and more effective. At the same time, the increasing cost of services and the levelling off of state and federal appropriations are resulting in vocational rehabilitation agencies that are hard pressed to maintain their present level of service. A new look must be taken at the financial structure needed

to support vocational rehabilitation services.

2. The problem of training personnel continues. Universities cannot be expected to turn out more than twenty per cent of the counselors needed each year. The vocational rehabilitation agencies recognize this. Federal support of in-service programs is scant, and top level administrators in the states are reluctant to use large amounts of funds for this purpose because badly needed funds for services would then be reduced. The state vocational rehabilitation agencies are urging the Rehabilitation Services Administration (RSA) to substantially increase the amount of federal money for in-service programs. To assist in meeting in-service training needs, the RSA is now supporting continuing education centres which concentrate on making degree courses available to employed rehabilitation personnel.
3. The requirement that the states give priority to services for severely disabled people has resulted in a new set of problems. The definition of the severely disabled in law is inadequate and the regulations are difficult to interpret and apply. Particularly difficult is the classification of certain groups of mentally ill, mentally retarded, and physically impaired persons (e.g. the blind), the severity of whose disabilities are compounded by emotional, social or educational inadequacies.

### Vocational Rehabilitation in Sokoto State

In examining the rehabilitation of the blind in Sokoto, it should be borne in mind that we are dealing with a society where kinship and family ties are very strong. The society has also not gone through modern day revolutions, which have as one of their effects the production of a strong sense of individualism. The family plays a central role in the life of an individual. The seemingly enduring sense of family and kinship ties has lured the government and people into thinking that rehabilitation is not essential. However, the fact is that family and kinship ties are undergoing changes and those changes must be accommodated differently. The growth of urban centres, the creation of new jobs, and the effect of western education are changing the shape of the family and the role it plays.

As a result of the strong dependence on the family to take care of its handicapped members, rehabilitation of the blind by the government is still a new thing. The majority of the people, especially those in the rural areas, do not understand the importance of rehabilitating the handicapped. Some of them are not even aware of the existence of the program. The infancy of the program, coupled with other problems to be discussed in the following pages, has added to the problems encountered in the rehabilitation of the handicapped.

Another major problem in rehabilitating the blind in Sokoto State is community attitudes towards the handicapped. Community acceptance of handicaps (e.g. blindness) has been

slow. Even when a handicapped person has undergone vocational training, his/her chances of getting a job are slim. Even the government which provides them training is reluctant to employ them. Most of the blind people earn their living in engaging in some crafts.

The rehabilitation of the blind in Sokoto State is undertaken under the auspices of the Social Welfare Division of the Ministry for Social Welfare, Youth, Sports and Culture. Prior to 1979, the Division had been part of the Ministry of Health. Since it is part of a Ministry with several divisions the proper implementation of its programs depends on the ability of the head of the division to draw the attention of the Permanent Secretary of the Ministry. In fact, when this writer worked in that Ministry in 1981, the government attached more importance to the development of Youth and Sport programs.

The Social Welfare Division has under it the Rehabilitation Centre for the Disabled, which is responsible for providing training to the blind, deaf, and crippled persons. The centre was jointly established by the federal and the state government and it started its operations only in 1984. The centre undertakes both medical and vocational rehabilitation for disabled persons. It also has a production wing which provides employment to the trained persons. The centre trains 300 handicapped persons each year. Since the centre started its operations only in 1984, and its first batch of trainees are yet to graduate, it is not possible at this point to assess the effectiveness of the program. However,

it is clear that the only kind of vocational training available to the blind persons at the centre is making crafts.

The Social Welfare Division also operates a blind centre. The primary function of the centre is the training of blind persons in various crafts, e.g., mattresses, foot-mats, carpets, cane chairs, baby carry cots, baskets, brush and raffia stools. The training lasts for one year and the trainees are given a stipend equivalent to \$60 each month. On completion of training, each of them is given a grant of \$700 in the form of material and cash to enable them to start their own work and utilize their training. No other kind of vocational training is given to the clients. This is because, as mentioned earlier, most employers, including the government are reluctant to employ handicapped persons. The result, however, negates the purposes of vocational training because it encourages the blind to feel that they are different kinds of human beings. Because of the helplessness and frustration resulting in this kind of approach, those blind people who cannot sustain themselves through the crafts they make, resort to begging for alms on the streets. In fact, a measure of the failure of vocational rehabilitation (although this cannot be entirely attributed to it) is the great number of blind people who beg for alms. This not only harms the blind but the society at large, because it means that a sizeable number of people who could be productive become a burden on the society. There are no census figures for the blind in Sokoto State, so it is not possible



to give the exact number or even an approximate number of blind persons who beg. This is not surprising because there are no accurate census figures for the rest of the Nigerian population. Even if the vocational training program is structured in such a way that the trainee is able to acquire the skills to work for an organization, there is no law protecting him/her from being discriminated against.

Apart from the lack of a constructive training program which will lead to gainful employment, vocational rehabilitation is made more difficult by the lack of well trained personnel. For example, the blind centre is administered by a supervisor who is a high school graduate with no training in the rehabilitation of the blind. There are no counselors who work with the blind in order to ensure that they achieve their vocational rehabilitation goal. The only staff of the blind centre apart from the supervisor are the staff who train the blind in making crafts. Once the one year training period is over, a person graduates regardless of whether he has acquired sufficient competence to make the crafts.

On the question of eligibility, neither the Rehabilitation Centre for the handicapped nor the blind centre has any clearly defined rules and regulations. The only qualification for enrollment is a physical handicap. The lack of a clear definition of eligibility leaves the supervisor with the power of deciding who gets into the training program unless he is overruled by the head of the Division. Since both the Rehabilitation Centre and the

blind centre are placed in Sokoto (the state capital), proximity plays a large part in deciding who gets into the training program. Those living in the rural areas, because of the distance to the state capital, their handicaps, and their economic circumstances, are unable to travel with ease to Sokoto in order to enroll into the program. The Social Welfare Division does not provide transport for them.

The other major problem with the rehabilitation program is that there is no mobility training. The primary emphasis of the program is to teach blind persons some crafts instead teaching them the tasks of daily living. The lack of a mobility training program affects the competence of the trainees in learning what they are taught because they have not mastered the techniques of moving around with minimum hinderance. It also reduces their ability to function in the general society because they have no training on how to cross the road or cook meals for themselves.

### Conclusion and Summary

In the preceeding pages, an attempt has been made to define social welfare and vocational rehabilitation. In attempting to define social welfare, it has been established that the social welfare system of a country is the result of the dysfunctions within the market system of that political system. How the political system responds to the dysfunctions within the market system depends on its structure, commitment and political ideology. It is, therefore, not surprising that the United States and Sokoto

have responded differently to those dysfunctions since their political structures and ideology are different.

In reviewing the rehabilitation model in the United States cognisance is given to the fact that it does not share exactly the same kind of socio-economic conditions as Nigeria. However, this will not detract from the purposes of the paper since it is borne in mind that, no matter the dissimilarities, the potential for applying some of the methods of rehabilitation exists in Nigeria. The purpose of examining the United States model is to enable the writer to acquire some insight into how other rehabilitation models are organized and how the useful aspects of the models may best be suited for the peculiarities of the situation in Nigeria.

The chapter has also tried to highlight the major problems confronting vocational rehabilitation in Sokoto. These problems include the lack of constructive training programs for the blind, lack of clearly defined rules and regulations of eligibility for rehabilitation, and community attitudes toward employment of the blind.

Having set the background, the next chapter will examine vocational rehabilitation, with particular emphasis on the rehabilitation of the blind in the State of Montana.

## CHAPTER ONE - ENDNOTES

<sup>1</sup>Encyclopedia of Social Workers (New York: National Association of Social Workers, 1971), p. 1446

<sup>2</sup>Walter Friedlander, Introduction to Social Welfare, (Englewood Cliffs, N.J.: Prentice Hall, 1955), p. 140

<sup>3</sup>John Turner, Development and Participation (New York: International Council of Social Welfare, 1974), p. 19

<sup>4</sup>Joseph Hefferman, Introduction to Social Welfare Policy, (Illinois, F.E. Peccoli Publishers, Hescs, 1979), p. 40

<sup>5</sup>Encyclopedia of Social Workers, (New York: National Association of Social Workers, 1977), p. 273

<sup>6</sup>Ibid., p. 272

<sup>7</sup>Robert E. Thomas, "The Concept and Process of Vocational Rehabilitation," Rehabilitation Record, 11 (May-June 1970)

<sup>8</sup>Encyclopedia of Social Workers, 1977, p. 275

<sup>9</sup>Oberman C. Esco, quoted in Ibid., p. 271

<sup>10</sup>Maggie Bullock, Supervisor Visual Services Division, Department of Social and Rehabilitation Services, Helena, and Mike Connors, Counselor, Visual Services Division, Missoula. Interviews conducted by the author on October 10, 1984

<sup>11</sup>Department of Education, Rehabilitation Services Administration, Region VIII, Progress Report Relating to RSA Objective 841 (Denver, 1984), pp. 3-5

## CHAPTER TWO

## THE REHABILITATION OF THE BLIND IN MONTANA

This chapter discusses the rehabilitation of the blind in Montana, the process of determining eligibility, and the vocational training provided to those who are eligible. In particular, this chapter will examine the requirements necessary for a person to be admitted into the training program. This is important because for an agency responsible for the rehabilitation of the blind to be effective, it has to establish its functions and the people who should benefit from the discharge of such functions. An examination will also be made of the kind of training available, with particular emphasis on vocational training. This will aid the author in making recommendations for improvement of training of the blind in Sokoto State.

It is important first to examine the administrative structure of the Visual Services Division, Department of Social and Rehabilitation Services. The Division is responsible for determining eligibility and for administering the vocational rehabilitation program.

Visual Services Division: Administrative Structure and Functions

The Montana State government established the Visual Services program in 1937 under the Department of Public Welfare. In 1943, the government established a separate bureau in that department and charged it with the responsibility of providing medical and vocational services

to the blind. In 1967, the name of the bureau changed to the Visual Services Division, although it continued to provide the same services. The Executive Reorganization Act of 1971 transferred the Division to the Department of Social and Rehabilitation Services.<sup>1</sup>

The Division is headed by an administrator who reports directly to the Director of the Social and Rehabilitation Services Department. The Division has five field offices, each of which is headed by a counselor. The counselors are responsible for determining the clients who are eligible for rehabilitation and evaluating the progress of the clients in their rehabilitation plans.<sup>2</sup>

The functions of the Department are to provide rehabilitation services, teaching services, and orientation mobility services to its clients. It also administers the Business Enterprise program, which is set up to assist handicapped persons to establish their own businesses. In addition, the Division also provides visual medical services to its clients who are ineligible for vocational rehabilitation or clients who are to undergo medical rehabilitation prior to vocational rehabilitation.<sup>3</sup>

### Eligibility

The starting point of the rehabilitation program is the determination of eligibility. The determination of eligibility is important in the rehabilitation process because it sets the stage for everything that follows. It allows the Division to plan its program by knowing what

kind of training is appropriate for the clients, and the services they are entitled to be provided.

The eligibility requirements for all handicapped persons are the same, the only difference being that each disability has its own definition which must fall within the general requirements. For a person to be eligible for vocational training, he/she must have a physical or mental handicap. The legislation prior to the 1943 amendments in the Rehabilitation Act, defined a handicapped person as any "person who, by reason of a physical defect or infirmity, whether congenital or acquired by accidents, injury or disease, is, or may be expected to be totally or partially incapacitated for remunerative occupation."<sup>4</sup> This definition limited services only to the physically handicapped and was clearly conservative in its approach because it excluded the mentally handicapped. In 1943, the legislature amended the act to include the mentally handicapped. In the case of the vocational rehabilitation program for the blind, a blind person is defined as "a person whose central visual acuity does not exceed 20/200 in the better eye with correcting lenses or whose visual acuity is greater than 20/200 but is accomplished by a limitation in the field of vision in the better eye to such a degree that the widest diameter of the visual field subtends an angle no greater than 20 degrees as determined by an ophthalmologist or a physician skilled in the diseases of the eye."<sup>5</sup>

The second eligibility requirement is that a handicap must constitute a "substantial handicap"<sup>6</sup> to employment.

In other words, the mere existence of a handicap is not enough by itself to make one eligible for vocational training. There must be evidence that the handicap is an impediment to employment. This requirement has provided difficulty in determining who is eligible for vocational rehabilitation. This is because there is no workable definition of what constitutes a substantial handicap. The absence of a workable definition has placed a considerable burden on the counselors who have the responsibility of determining who is eligible for rehabilitation. It has also made their decisions highly subjective in nature. What one counselor considers a "substantial handicap" may not be acceptable to another counselor.<sup>7</sup>

The third requirement of eligibility for vocational rehabilitation is that there is a reasonable expectation that vocational rehabilitation services will result in the disabled being employed. This provision was made in order to avoid taking on clients who have no chance of completing their rehabilitation plans, thereby expending much needed resources and time.

Under the vocational rehabilitation program, there is also the business enterprise program. This program is intended to provide business opportunities for qualified blind persons. Conditions for eligibility into this program are the same as for the vocational rehabilitation program, but in assessing a client's application the Division must determine that a person:

- (a) Is a citizen of the United States



- (b) Is at least 18 years of age
- (c) Can operate a business enterprise facility
- (d) Is in need of vocational opportunities.<sup>8</sup>

### Training

When an applicant is found eligible for entry into the training program, he/she is then evaluated to determine what kind of training he/she is suitable for. There are two different kinds of evaluations. In the first place, the client is evaluated to see if he/she is conversant with the activities of daily living (ADL). This is done by verifying whether the client can accomplish such things as walking on the streets or cooking a can of soup. If he fails to pass the test, then his training is restricted to that area until such a time that he can adequately perform those tasks. This kind of training is called mobility training and is administered by the Visual Services Division. In some cases, clients are referred to the Centre for independent living where those kinds of skills are taught.

If the client passes the first type of evaluation, he/she then undergoes the second type of evaluation in order to determine whether he/she can do such things as write a check or make a telephone call. When it is determined that the client can perform these tasks, he/she can then be prepared for vocational training. Since vocational training requires the education of the client in skills that the department is not equipped to handle, the training is contracted to a university or to a vocational technical

school, depending on the vocational goal the client has worked out with his/her counselor. The argument is often made that reliance on contracts for delivery of services reduces the efficiency with which those services are delivered. The arguments of the proponents of this view are eloquently stated by Charles T. Goodsell. He contends that contracting out services makes the process of delivering them more complex and difficult to understand. It also makes the task of establishing accountability more difficult. According to Goodsell, "the task of coordinating resources is made much more difficult. The control inherent in the operations of 'in-house' direct administration - via formal lines of authority and established channels of communication - are absent or reduced in effectiveness."<sup>10</sup> Goodsell also points out that there is a third problem associated with contracting out services. The problem is that agencies which contract out their services become "empty shells" and are only left with the task of examining and coordinating the activities of others instead of actually delivering the services themselves.

However, an examination of these arguments will reveal that they have little relevance to the case of the Visual Services Division. The arguments against contracting out services presented by Goodsell are sweeping in their generalization. In the first place, there is no distinction as to what type of agency is being given the contract. Giving out contracts is treated simply in relation to private firms without any consideration that such contracts can be given

to other government agencies and institutions. Sending clients to a state university or vocational training center does not increase the complexity of the process, nor does it result in the loss of accountability. Each counselor keeps in touch with his client and evaluates progress in his/her vocational rehabilitation plan. In the two major universities of Montana, there are advisors for the handicapped who see to it that handicapped students are adequately taken care of. The students also receive the same type of education at the same cost with the rest of the students. The argument that agencies which contract out their services become "empty shells" is also not applicable to the Visual Services Division. This is because apart from vocational training which the Division monitors, it also handles other things such as mobility training, teaching services, and the Business Enterprise Program.

Once the vocational goal has been worked out between the client and the counselor, a timetable is then prepared outlining the services the client will receive and the cost of such services. At this stage, the client is also expected to make a financial statement to determine if he/she can or cannot contribute to his/her rehabilitation plan. After drawing up the rehabilitation plan and the participation agreement, the client then starts the rehabilitation program. The counselor makes periodic reviews to determine the progress of the client.

While undergoing vocational training, the department may provide the applicant with the following services:<sup>11</sup>

Training materials. The department may furnish the client with the materials where it is expected that they will help the client to realize his potential or develop his vocational rehabilitation. The kind of training covered under this includes: vocational, prevocational and personal adjustment training.

Restoration services. The department may also provide the client with eyeglasses and visual services if authorized by a physician.

Transportation. Transportation is also included in the services that may be provided to the client and where necessary to members of his family. The transportation is provided only if the client is going for treatment, training or if he is being relocated for the achievement of a vocational training objective.

Income maintainance. This is granted in special instances to enable a client to derive the full benefit of other vocational rehabilitation services he is receiving. However, should the client secure employment, the income maintainance will be provided for only a period of 30 days.

Vocational assistance. The client may also be provided with customary tools and equipment. In the case of a client going into business or agricultural enterprise, he may be provided with initial stocks and supplies, including livestock to enable him to take-off successfully.

Reader service. The department provides reader service to those trainees who are conversant with braille. Reader services also include instructional services.

Other services provided by the Department include services to dependents, where the service is required as part of the vocational rehabilitation plan. Where a client is severely disabled, the department may provide him with an attendant, who will act as his escort to and from school, shop or other institutions where services are provided. The provision of this service is dependent on the inability of the client to pay for himself.

### Conclusion and Summary

The main effort in this chapter has been to outline the eligibility requirements and the basic elements of the training program in Montana. The eligibility requirements have been treated as a process of gaining entry into the training program. In examining the eligibilty requirements, we discovered that the basic weakness of the system is its failure to define what constitutes substantial handicap.

The chapter has outlined the services that clients may be entitled to during the vocational rehabilitation process. It also evaluated the Visual Services Division's major means of providing vocational rehabilitation i.e. contracting out. The argument against contracting out are not applicable in the case of vocational training in Montana.

The next chapter looks into ways and means clients are aided in finding suitable employment in the State of Montana.

## CHAPTER TWO - ENDNOTES

<sup>1</sup>State of Montana, Department of Social and Rehabilitation Services, Manual, 1979, 001-1

<sup>2</sup>Ibid., 002-1

<sup>3</sup>Ibid., 002-3

<sup>4</sup>Council of State Administrators of Vocational Rehabilitation (Washington, D.C.: Vocational Rehabilitation Administration Social and Rehabilitation Services, U.S. Department of Social and Rehabilitation Service, U.S. Department of Health, Education and Welfare, 1967), p. 20

<sup>5</sup>State of Montana, Administrative Rules of Montana, Department of Social and Rehabilitation Services, 1984, 46-2-2605

<sup>6</sup>Ibid., 46-6-305

<sup>7</sup>Mike Connors, Counselor, Visual Services Division, Department of Social and Rehabilitation Services, Missoula, Interview conducted by the author on October 20, 1984

<sup>8</sup>Administrative Rules of Montana, 46-6-2501

<sup>9</sup>Charles T. Goodsell, The Case for Bureaucracy; A Public Administrative Polemic (New Jersey: Catham, 1983), p. 68

<sup>10</sup>Ibid., p. 69

<sup>11</sup>Administrative Rules of Montana, 46-6-501

CHAPTER THREE  
PROMOTION OF EMPLOYMENT OPPORTUNITIES FOR THE  
BLIND IN MONTANA

This chapter is concerned with examining and analyzing the efforts of the Department of Social and Rehabilitation Services in trying to find employment for those who have undergone training and have been declared fit for employment. An examination of the laws, rules and regulations safeguarding the interests of the handicapped will be made. The chapter will also examine whether the liason with agencies like the Job Service is conducted in such a manner that will ensure the employment of the handicapped.

Affirmative Action for the Handicapped

The first part of this chapter will deal with the Affirmative action program which is designed to, among other things, aid all handicapped people to secure employment. Like all major employers in the United States, the Montana State government is obliged to implement the requirements of the equal employment opportunity program, which is designed to protect minorities, women and the handicapped. Hence, "it is the policy of the state government of Montana to provide equal employment opportunity for all qualified persons to prohibit discrimination in employment because of race, sex, color, national origin or disability and to promote equal employment opportunity through positive continuing programs in each department."<sup>1</sup> Also, in compliance with the Rehabilitation Act of 1973, "all state

agencies are required by state personnel division guidelines to include women, minorities and the handicapped in their affirmative action plans."<sup>2</sup>

Recently the state government has picked up the pace of its implementation of the Affirmative action program. This is indicated by the fact that from 1982-84 the number of handicapped people in the employ of the state government has more than doubled. In the 1983/84 program year, the number of state employees rose from 205 to 284, that being an increase of 38.5 per cent.<sup>3</sup>

The state government has employed several strategies in order to increase the number of handicapped employees. It is difficult to make a categorical statement about which strategy has been most successful in furthering the goals of the affirmative action program since there are no figures indicating the exact number of handicapped employees each strategy is responsible for attracting. That notwithstanding, one can deduce that the Crabtree vs. Montana State Library case of 1983, in which the Montana State Supreme Court interpreted the Veterans and Handicapped Persons Preference Act as an absolute preference, has had some impact on the employment of veterans and the handicapped. Although the case itself did not immediately lead to the employment of handicapped people in large number, it did serve to stir up some debate and bring to attention the problems of veterans and the handicapped. As a result of that debate, the Montana State Legislature in December 1983 modified the preference to a tie-breaker. This means that



whenever disabled veterans or handicapped people are among the most qualified to perform a job, they should get preference in hiring. The modification of the law served to mollify the opponents of the Crabtree decision, thereby leading to a more conducive atmosphere for the employment of the handicapped. It is also significant to note, as pointed out earlier, that it was in the 1983/84 program year that the number of handicapped people employed by the state increased by 38.5 per cent.

Another strategy the state government has employed is to dispel the myths and fears regarding the employment of the handicapped. Even though the success of this strategy cannot be quantified in terms of numbers, it would seem that this would make it easier for employers to comply with the Veterans and Handicapped Preference Act, knowing that the handicapped people they employ can perform their jobs competently. The third strategy is through the Handicapped or Disability Selection Guide and the Guide for Reasonable accomodation issued by the State Personnel Division. This strategy is designed to help agencies become more aware of the needs of the handicapped person.

The state government now has employees in the administrative, professional, clerical, protective services, para professional, technical skilled craft and service job categories. The percentage of all disabled employees among administrators is 3.6, 3.8 among professionals, 2.9 among technicians, 2.9 in the protective services, 2.2 among para-professionals, 2.5 among clerical workers, 2.1 in skilled

crafts, and 3.1 in service. The total number of all disabled employees is 3.0. The number of these disabled persons who are blind is simply not known, although the state hopes to collect better statistics in the future.<sup>4</sup>

#### Placement for the Blind by Social and Rehabilitation Services

Apart from the Affirmative action program which has made conditions more amenable to the employment of the handicapped, the Department of Social and Rehabilitation Services has its own rules and regulations which further enhance the chances of blind persons seeking employment. The administrative rules of the department state that "the Department either directly or through the services of other public and private agencies will assume responsibility for developing a placement for a client which is appropriate in accordance with the goals of his vocational rehabilitation."<sup>5</sup> There are several ways in which the department tries to find employment for its rehabilitated clients. The most common way of doing this is for the placement officer to get in touch with the job service which will then assume the responsibility of placing a client. The placement officer may also get in touch with other agencies that have vacancies in order to find employment for the clients. For those clients who show promise of being able to find jobs for themselves, especially those with a professional training, they are only taught such basic things as resume preparation and how to conduct themselves at interviews and then they are left on their own. Although this

sounds like a good idea because it teaches the clients to be self-reliant, it is not properly monitored. At present, the Department has no records with which it can make a proper evaluation of the strategy and find ways of improving it if necessary.

After a client has secured a job, several follow-up visits are made by a department representative to assess the success of the placement and to find out if the client needs any further assistance. If the client is suitably placed, this his/her case will be closed. A client is suitably placed if the following conditions are satisfactory:<sup>6</sup>

- a. That the work performed is consistent with the client's physical and mental capacity, interests and personal characteristics;
- b. That the client possesses or has acquired necessary skills to perform work successfully;
- c. That the work has reasonable permanency;
- d. That the working conditions will neither aggravate the client's disability nor jeopardize the health or safety of others.
- e. That the employment provides adequate income for the client and his family;
- f. That, if not employed full-time, the job is consistent with client's capacity to work and produce; and
- g. That the wage and working conditions conform with the state and federal statutory requirements.

Those who cannot get a job through the job service, or on their own are put into sheltered workshops, although

opportunities for this are now limited.

Although there are well-defined programs for protecting the interests of the handicapped in Montana when they seek employment and even though follow-up visits are undertaken, a major weakness of the program is the lack of accurate data and an effective monitoring program. As pointed out earlier the strategy of allowing clients to find jobs for themselves, although good in concept, is not monitored in order to ensure their success. This makes it impossible for the department to evaluate the strategy and make changes that might be needed. An example of the ineffectiveness of the monitoring system is evidenced by the records contained in the counselor master list of 1983 which is the primary source of information on the number of blind people who applied, were rehabilitated, or found ineligible by the division. In 1983, 744 blind people applied to the visual services division for training. Out of the 744 people, the division declared 233 ineligible for training. Of the remaining 511 people 61 succeeded in completing their rehabilitation plans. Those who could not complete their rehabilitation plans that year continued because they are allowed a period of 4 years to complete their plans. Out of the 61 people rehabilitated, 39 secured employment. Since the Division has no records of what happened to the other 22 people who completed rehabilitated plans, it has no way of evaluating why they failed to get jobs so that next time those problems could be handled in a better way.<sup>7</sup>

### Conclusion and Summary

The affirmative action program provides a conducive atmosphere for the employment of handicapped people in the State of Montana. The state is making appropriate progress in the employment of handicapped persons. However, there is still room for improving the implementation of the Affirmative Action program. One way of doing this is for each agency to have numerical goals for the employment of handicapped persons as is done in the case of women and minorities. This will ensure that even more handicapped people are employed each year.

The placement service provided by the Department of Social and Rehabilitation Services is good in theory. The department should improve its efforts by keeping accurate data and ensuring effective monitoring of its efforts. This would allow for proper evaluation of the program and make it much stronger.

Chapters Two and Three examined how a blind person becomes eligible for rehabilitation, what kind of training is available to him/her, and what assistance is given to him/her in seeking employment. In the following chapter, based on some of the things we have learned about the need to have precise eligibility requirements, concise training programs, and effective placement programs, and taking the peculiar conditions in Sokoto into consideration, recommendations will be made for the improvement of services in Sokoto State of Nigeria.

## CHAPTER THREE - ENDNOTES

<sup>1</sup> State of Montana, E-E-O and Affirmative Action Program, Annual Report to the Governor, (Department of Administration, Helena, 1984), p. 1

<sup>2</sup> Ibid., p. 5

<sup>3</sup> Ibid., p. 15

<sup>4</sup> Ibid., p. 16

<sup>5</sup> State of Montana, Department of Social and Rehabilitation Services, Administrative Rules of Montana, Vocational Rehabilitation, 1984, 46-6-504

<sup>6</sup> Ibid., 46-6-508

<sup>7</sup> State of Montana, Department of Social and Rehabilitation Services, Report NBR. SRV0005.1, Agency - 075 Visual Services, Counselor Master List, (Helena: SRS, 1983), p.

## CHAPTER FOUR

### CONCLUSION AND RECOMMENDATIONS

In Chapters Two and Three, we examined and analyzed the eligibility requirements, training program, and placement efforts of the Department of Social and Rehabilitation Services in Montana. The examination of these aspects of the rehabilitation system in Montana will enable the author to come up with recommendations for the improvement of services in Sokoto State. However, the problems associated with rehabilitation in Sokoto State are much more than the lack of precise eligibility requirements, a sound training program, or the lack of a means of assisting handicapped persons in securing employment. Therefore, a part of this chapter must be devoted to making recommendations to overcome problems that are not directly related to the rehabilitation program itself, but that have considerable impact on the program. If these problems are not adequately tackled, the establishment of a viable program for the rehabilitation of the blind would prove to be even more difficult.

It is the contention of this writer that the Sokoto State government has not set its priorities right. Another way of saying this is that the government has bitten off more than it can chew, and this has affected its ability to deliver those services that are essential. The result is that programs such as the rehabilitation of the blind suffer from neglect. The government organizes and funds

programs like sports, youth, and cultural activities. These programs can be properly organized by the local and business communities. It is discouraging that in a society where resources are severely limited and where basic infrastructure are not available, the government continues to expend time and energy on programs that are not of vital importance to the vast majority of the people. The first recommendation is that the government should cut its commitment in areas that are not essential e.g. sports, culture and youth clubs. This would allow the government to use its funds more judiciously and may even provide the personnel to be used in executing other programs.

Another important problem, which is outside the immediate purview of the rehabilitation program but which has considerable impact on it, is the role of charity and advocacy groups. The government should make conscious efforts to encourage business and community leaders to set up charity groups that will contribute funds for the rehabilitation of the blind. The government can do this by providing incentives such as honorary degrees or certificates of recognition to people who have made outstanding contributions. Advocacy groups such as the Sokoto State Association of the Blind should also make efforts to raise funds through organizing lectures or exhibition of crafts made by the blind. Funds realized from these types of efforts need not be handed over to the government, but should be used by the association to provide some service to the blind.



In conjunction with its efforts to encourage the creation of charity groups, the government, should also conduct a campaign to draw the attention of the society towards the plight of the blind and the importance of rehabilitating them. The campaign should emphasize the point that given the chance the blind can hold jobs and perform as well as anyone. The campaign, if properly conducted, would erase some of the negative views people have about the abilities of not only the blind but other handicapped people as well. In the section of this chapter dealing with placement, we shall deal with how the campaign should be backed up with a law which should guarantee employment opportunities for the blind and other handicapped people as well.

Having examined what the government can do to improve the chances of establishing a viable program for the rehabilitation of the blind, it is appropriate at this point to examine ways in which the Social Welfare Division can be more properly organized.

#### The Social Welfare Division

The Social Welfare Division, which is responsible for the rehabilitation of the blind, is presently suffering from obscurity. The reason for its obscurity is that the society is not sufficiently educated in its functions. The government should try to publicize the existence of the Division and its functions. Secondly the Division has nothing in common with the rest of the Divisions in the

Ministry where it is now situated, i.e. the Ministry for Social Welfare, Youth, Sports and Culture. The Permanent Secretary cannot properly coordinate the activities of the Ministry when its different parts have nothing in common. The Social Welfare Division also suffers because the other Divisions in the Ministry are more visible than it is in terms of the public interest they generate. The Permanent Secretary, therefore, pays more attention to the needs of the other Divisions. The Social Welfare Division should be moved to the Ministry of Health. The Division has more in common with the Ministry of Health. The Division will also benefit from association with experts such as doctors, nurses, and other professionals in the Ministry of Health.

The move to the Ministry of Health would also enable the division in conjunction with the Ministry to develop programs like the prevention of blindness. Experts in the Ministry and the Division should be formed into a Sokoto State committee for the prevention of blindness. This will help reduce the number of people afflicted by blindness and thereby reduce the number of people to be rehabilitated over the long term. Another benefit that can be derived from the move to the Ministry of Health is that those who cannot be vocationally rehabilitated can be more easily provided with medical rehabilitation.

Apart from the establishment of a committee for the prevention of blindness and the easier access to medical rehabilitation, the Division should also push for the establishment of a research group, as is the case with the

vocational rehabilitation model in the United States. The research group need not be composed of members of the Division only. It should be composed of Doctors in the Ministry of Health, Staff of the local university who are experts in the field of social work, and one or two members from the Division itself. The group should be charged with the responsibility of looking into new techniques that will enhance vocational rehabilitation. Funding for the research can be realized in one of the following ways:

- (a) The Division can request the Sokoto State government to bear the cost of the research. This means that the Division would only ask the state government to increase its budget in order to meet the demands of this new expenditure item. Although this approach sounds quite reasonable since the Sokoto State government established the Division, the funding may not be adequate as the Sokoto government has numerous other responsibilities and few resources.
- (b) The assistance of charity groups should be solicited. This approach is not likely to bring substantial amounts of money because there are few charity groups, and they don't have much money at their disposal. However, this approach is one that should be used to complement whatever approach is adopted.
- (c) The federal government should be asked to provide the funds for the research. In its request which should be made through the state government, the Division should demonstrate that the research to be conducted

will be beneficial to the rest of the country. This request, if approved, is likely to cause some unfavorable comments from other states. Moreover, there is no certainty that the federal government itself can bear the cost of the research.

- (d) The research should be jointly funded by the Sokoto State and the federal government. This approach will minimize any hardship for both partners and will also be an example for other states to follow. As suggested earlier, the contribution of charity groups should be utilized.

#### Eligibility

After being properly organized, the Social Welfare Division should turn its attention on establishing rules and regulations which should aid in the discharge of its responsibilities. The Division should start with the creation of precise eligibility requirements since this is the first step in the rehabilitation process.

For a person to be eligible for vocational rehabilitation, it must be determined that he is blind. This means that a legal definition of blindness should be established, so that judgements on who is blind or not are not made arbitrarily. Since the goal of vocational rehabilitation is to enable the client to hold a job, the handicap must constitute a hinderance in the ability of the client to hold a job. There is no need to demand that the handicap should be substantial because as we discovered in the case

of Montana, this will only create a difficulty since there is no definition of what is substantial or not. So long as the handicap hinders the client from holding a job then he should qualify for rehabilitation. The third requirement is that there should be the possibility that vocational rehabilitation will lead to employment. There is no point in expending resources on rehabilitating someone when there is no chance that he/she will ever be able to work again. It could also be frustrating to the client if he/she should go through a rehabilitation plan without any hope of being successful. However, those who cannot be vocationally rehabilitated should be allowed to enroll in the medical rehabilitation program.

The Social Welfare Division should also work with a Medical Board composed of doctors who specialize in eye diseases. It is risky to leave the determination of eligibility in the hands of counselors who do not possess the medical knowledge to make such judgements. The Medical Board should also be responsible for recommending alternative types of rehabilitation if they find that vocational rehabilitation is not appropriate.

The Division should also establish an appeals process, so that clients who feel that they were unjustly declared ineligible may have some means of recourse. Clients may also appeal if they feel that the kind of rehabilitation they are being provided is not adequate. The appeal should initially be dealt with by the Division and if the client is still not satisfied, he/she should be provided with the

chance to take his/her case to an independent panel. Such a panel should not be composed of permanent staff, in order to avoid personnel expenses. It should be composed of a doctor and lawyer who can be called upon when the need arises.

In order to reduce the financial burden of the Division, those clients who can afford it should pay all or part of the cost of rehabilitation depending on their income. For those who cannot pay, the Division should try to secure scholarships for them, e.g., from the Sokoto State Scholarship Board or the Federal Scholarship Board.

### Training

The training of the blind in Sokoto State has to start from scratch, if it is to be of any effect. This means that the training program should be enlarged to include children. At the moment, children who are born blind - except those who come from well-to-do families - are more likely to end up as beggars on the streets. This is because they have no formal education or skills in any trades. A school should be established to cater to the regular needs of the children. This approach has two advantages. The first one is that by the time they become adults, they already have some training which will enable them to hold jobs. Secondly, the vocational training programs will become less congested. The school which trains these children should be staffed by people who can teach them not only regular subjects but also be able to counsel them on ways to cope with their disability. In other words, they should

be both counselors and teachers.

At the adult level of the training program, more facilities are needed. At the moment, there is only one blind centre in the State. Although, there are no census figures on the number of blind people in the State which can be used to justify the need for more centres, the fact that the centre is not easily accessible to those living in the rural areas is enough justification to provide centres that are much closer to their homes. In making this recommendation the reality of the financial situation in the state is taken into consideration. There is no need to establish several centres which the government cannot support simply to satisfy the need to have more schools. The fact that there are not many people with the expertise to manage these centres should also be a caution against establishing many schools at the same time. The centres being proposed should be seen as pilot projects which will form the models for other schools to be established when the financial situation improves and also when staff are more readily available. Therefore, this paper recommends that only two centres should be established at each end of the state e.g. in Birnin-Kebbi and Gusau. With one blind centre at each end of the state and one in the centre of the state the problem of proximity will be minimized. It will also ensure that a decent quality of training is given since the resources of the Social Welfare Division will not be overstretched. Each of the blind centres should have the following staff:

1. A supervisor who is directly responsible to the chief social welfare officer. The supervisor should have a minimum qualification of an Advanced Diploma in Public Administration.
2. A counselor with a minimum qualification of a diploma in Social Work.
3. A teacher in mobility training. In addition to his expertise in mobility training, the teacher should have a minimum qualification of a National Certificate of Education (N.C.E.).
4. A braille teacher who should also hold a minimum qualification of a National Certificate of Education in addition to braille.
5. A clerk with a minimum qualification of a high school certificate. The clerk should be responsible for assisting the supervisor in his administrative duties.

The number of staff recommended is based on the projection that for the first year of the centres' existence only forty students will be admitted. The number of staff should be increased as the centres grow.

The course content as it now stands need to be made more comprehensive. Although teaching the blind to make crafts is important because it provides them with some means of livelihood, in another way it negates the objectives of vocational rehabilitation. Vocational rehabilitation is designed to allow the client to hold a job and to feel like a normal part of the society. The training provided now does not serve that purpose because the crafts they



are taught are not the kind of skills employers are looking for. The Social Welfare Division should develop ties with schools in the State, so that clients can go there and receive the kind of education and skills that will enable them to compete for jobs.

In order to ensure the success of the rehabilitation of each client, the counselor needs to work closely with the family of the client. This does not mean that the family should also go through the process of rehabilitation, but they should be made aware of the task the client is involved in and be supportive towards him/her. The involvement of the family in the rehabilitation of the client will increase the sources of support at his/her disposal. The client would receive advice from his counselor, inspiration from his colleagues and the love and comfort of his/her family. This measure is also important because of the closeness of the client to his/her family. Unless they are educated on how to help him/her, they might inadvertently undo all the things he/she learned during the rehabilitation period.

### Placement

The question of placement is not something that the Social Welfare Division can take care of by itself. The necessary conditions favoring the employment of the handicapped have to be created and only the state government can do that authoritatively. However, since the Division is in charge of the welfare of the blind and other handicapped people it can draw the attention of the government

to this issue by documented research on some handicapped people who have managed to make significant contributions to the society in spite of their handicaps. The research should point out that even with this demonstration of their abilities the handicapped are largely unemployed. The Division can also draw the attention of the government to the fact that unless some measure is taken the prejudices that people have against the abilities of the blind will continue to be obstacles to the employment of the blind.

As has been recommended earlier, the government should conduct a campaign to educate people on the abilities of the handicapped and the need to provide them with employment. After a reasonable amount of campaigning the government should enact a law which will require all major employers to employ a reasonable number of blind people. All government departments and corporations that employ more than 150 people should be subject to the law. The number of blind people they employ should reflect the size of the number of blind in the workforce in their areas of operation. The government should lead the way by employing handicapped people in its agencies. This will not only provide an example to other employers but it would provide a practical demonstration of the abilities of the handicapped people. The law should require the Ministry of Establishment - which is the agency responsible for personnel matters in the state - to monitor compliance with the law. The Ministry should have the power to advise employers to comply

with the law and if they fail it should take them to court.

The Social Welfare Division should also work closely with the Ministry of Labor, to ensure that its clients get jobs. The Division can achieve this by appointing a placement officer who will be responsible for ensuring that clients get jobs. The Division should not rely solely on this method, but should also go directly to other agencies where vacancies exist. This will reduce the bureaucratic red tape and also give the Division the added benefit of developing direct links with other employment agencies.

After a client has finished his/her rehabilitation plan and secured a job, the Division should monitor his/her progress for three months. In undertaking to monitor the client, the Division should ensure that the job does not pose any threat to his/her health or that of others. The Social Welfare Division should also ensure that the client is paid commensurate with the work he/she does. For those who are taught some crafts and given some money to start their own business, the Division should make sure that the money is used for what it was meant, otherwise the client may find him/herself on the streets again.

It is relevant at this juncture to review the contribution that the examination of the rehabilitation model in Montana has made to the recommendations made in this paper. The examination of the system in Montana on each of the three principal issues concerning this paper (namely; eligibility, training, and placement) has proved beneficial. As a result of the research undertaken on the services in

Montana, the author came up with recommendations on how eligibility requirements for Sokoto can be established. On the question of training, the author recommended that the Social Welfare Division should incorporate mobility training into its program. It is also recommended that the Division should work with universities and other colleges in the areas to assist its clients in acquiring the skills they need in order to compete for jobs. These are important aspects of the vocational rehabilitation model in Montana. Another important contribution stemming from the Montana study is the realization that laws are needed to assist the blind in seeking employment. The practice of follow-up visits that are made after a client has secured employment has proved beneficial in connection with recommendations made in this paper.

However, since one of the major aims of the paper is to develop a system that will be unique to Sokoto, the author did not adopt all aspects of the Montana system. Instead of recommending that a handicap must be a substantial handicap to employment before a person is found eligible for vocational training, it is proposed that once a handicap hinders the ability of a client to work, then he/she should be eligible for training. Also, the author did not recommend the establishment of a library either for the blind in particular or the handicapped in general. This is not necessary at this point in time because the blind have to be educated before facilities like a library would be beneficial to them. One unique feature of social life in

Sokoto that can be exploited by the rehabilitation model in Sokoto is the importance of the family in an individual's life. The paper recommended that the family should be intimately involved in the rehabilitation process.

In conclusion, the writer has consciously tried to be modest in the recommendations made for the improvement of rehabilitation services to the blind in Sokoto. In the first place, there are no resources to implement an ambitious program. Secondly, I feel that it is wiser and prudent to take one step at a time. This would ensure that if mistakes are made, at least they will not be costly, nor will they take too much time to correct.

## BIBLIOGRAPHY

- Encyclopedia of Social Workers. Disability and Physical Handicap: Visual and Auditory Disorders. New York: National Association of Social Workers, 1971
- Encyclopedia of Social Workers. Disability and Physical Handicap Vocational Rehabilitation. New York: National Association of Social Workers, 1977
- Goodsell, Charles T. The Case for Bureaucracy; A Public Administration Polemic. New Jersey: Catham, 1983
- Hefferman, Joseph. Introduction to Social Welfare Policy. Illinois: F.E. Pescode Publishers, Inc. 1979
- Onokerhoraye, Andrew G. Social Services in Nigeria; An Introduction. London: K. Pare International, 1984
- Patti, Rino J. Social Welfare Administration: Managing Programs in a Developmental Context. New Jersey. Prentice Hall, Inc., 1983
- Sokoto State Ministry for Social Welfare, Youth, Sports and Culture. A Brief on the Activities of the Ministry for Social Welfare, Youth, Sports and Culture. Sokoto: Social Welfare Division, 1984
- State of Montana, Department of Administration. E.E.O. and Affirmative Action Program, Annual Report to the Governor. Helena: Department of Administration, 1984
- State of Montana. Department of Social and Rehabilitation Services. Administrative Rules of Montana. Helena: Vocational Rehabilitation Division, 1984
- State of Montana, Department of Social and Rehabilitation Services. Report NBR SRV0005.1 Agency-075 Visual Services Master List. Helena: Dept. of SRS, 1984
- Thomas, Robert E. "The Concept and Process of Vocational Rehabilitation - the First Twenty-five Years," Rehabilitation Record, 11 (May-June, 1970), pp. 7-9
- Thursz, Daniel and Vigilante L., eds. Meeting Human Needs: A Nation's Responsibility to the Human Needs of its Citizens, Vol. 1. London: Sage Publications, 1975.
- Turner, John. Development and Participation. New York: International Council of Social Welfare, 1974

- U.S. Government, Department of Education. Rehabilitation Services Administration, Region VIII. Progress Report Relating to RSA Objective 841. Denver: Department of Education, 1984
- U.S. Government, Department of Justice. Federal Register. Nondiscrimination Based on Handicap in Federally Assisted Programs. Washington, D.C.: Department of Justice, 1979